

Docket No.: \_\_\_\_\_

**DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter claimed and for which a patent is sought on the invention entitled \_\_\_\_\_

**RADIO PROTOCOL FOR MOBILE COMMUNICATION SYSTEM AND METHOD**

the specification of which

[ X ] is attached hereto [ ] was filed on \_\_\_\_\_ as Application Serial No. \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is known to me to be material to patentability in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).

I hereby claim foreign priority or provisional application benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate, or provisional application(s) listed below and have also identified below any foreign application for patent or inventor's certificate, or provisional application(s) having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s) or U.S. Provisional Application(s): Number	Country	Day/Month/Year	Priority Claimed Yes	Priority Claimed No
12255/1999	Korea	8 / April / 1999	X	

\_\_\_\_ I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Prior U. S. Application(s): Serial No.	Filing Date	Status: Patented, Pending, Abandoned
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I hereby appoint the following attorney(s) and/or agent(s): Daniel Y.J. Kim, Registration No. 36,186 and Mark L. Fleshner, Registration No. 34,596; Carl R. Wesolowski, Registration No. 40,372, John C. Eisenhart, Registration No. 38,128, Rene A. Vasquez, Registration No. 36,647, all

The Law Offices of  
FLESHNER & KIM  
P. O. Box 221200  
Chantilly, Virginia 20153-1200

With full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and all future correspondence should be addressed to them.

\*\*\*\*\*

Full name of sole or first inventor: In Tae HWANG

Inventor's signature: In-Tae Huang

Date: November 11, 1999

Residence: Kyonggi-do, Korea

Citizenship: Republic of Korea

Post Office Address: Kachi-maeul, Shinwon APT., 303-1204, Kumi-dong, Pundang-gu,  
Songnam-shi, Kyonggi-do, Korea

\*\*\*\*\*

Full name of joint inventor(s):

Inventor's signature:

Date:

Residence:

Citizenship:

Post Office Address:

\*\*\*\*\*

Full name of joint inventor(s):

Inventor's signature:

Date:

Residence:

Citizenship:

Post Office Address:

\*\*\*\*\*

Full name of joint inventor(s):

Inventor's signature:

Date:

Residence:

Citizenship:

Post Office Address:

\*\*\*\*\*